

2671
\$
[Signature]

In re Application of:

Docket No. 03500.015617.

HIROAKI NAKAZAW, ET AL.

Application No.: 09/915,419

Examiner: Jon Hadidi

Filed: July 27, 2001

Group Art Unit: 2671

For: CHARACTER PROVISION SERVICE SYSTEM,
INFORMATION PROCESSING APPARATUS
CONTROLLING METHOD THEREFOR, AND
RECORDING MEDIUM

Date: April 5, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|------------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 40 | MINUS | ** 43 | = 0 | x \$25 \$50 | \$0.00 |
| INDEP. CLAIMS | * 12 | MINUS | *** 7 | = 5 | x \$100 \$200 | \$1,000.00 |
| Fee for Multiple Dependent claims \$180°/\$360 | | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT— | | | | | | \$1,000.00 |


* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$1,000.00 is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

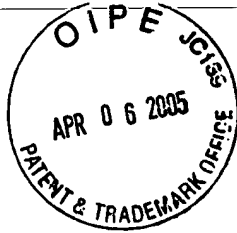
Respectfully submitted,



Leonard P. Diana
Attorney for Applicants
Registration No.: 29,296

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

NY_MAIN 492169v1



03500.015617.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
HIROAKI NAKAZAW, ET AL.)
Application No.: 09/915,419)
Filed: July 27, 2001)
For: CHARACTER PROVISION)
SERVICE SYSTEM,)
INFORMATION PROCESSING)
APPARATUS CONTROLLING)
METHOD THEREFOR, AND)
RECORDING MEDIUM)
Examiner: Jon Hadidi
Group Art Unit: 2671
April 5, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated January 26, 2005, please amend the above-identified application as follows. The claim amendments are reflected in the listing that begins at page 2, and the Remarks begin at page 12.

04/07/2005 JADD01 00000104 09915419

01 FC:1201

1000.00 DP